

Electronic Patent Application Fee Transmittal**Application Number:**

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Filing Date:

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Title of Invention:

AMPLITUDE AND PHASE MATCHING FOR LAYERED MODULATION RECEPTION

First Named Inventor/Applicant Name:

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Attorney Docket Number:

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Description

Fee Code

Quantity

Amount

Sub-Total in
USD(\$)**Basic Filing:****Pages:****Claims:****Miscellaneous-Filing:****Petition:****Patent-Appeals-and-Interference:****Post-Allowance-and-Post-Issuance:****Extension-of-Time:**

Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Miscellaneous:				
Submission- Information Disclosure Stmt	1806	1	180	180
Total in USD (\$)				180